

## 2005 Legislative Session A Banner Year For CD Field

**Governor Gregoire signs new treatment legislation**

During the 2005 legislative session, both the Legislature and Governor expressed their confidence that providing quality substance abuse prevention, intervention, and treatment services results in improved public health and safety, reduced medical and psychiatric costs, less crime and lower criminal justice costs, and, among youth, better school performance and less delinquency. Significant legislation was enacted and budget expansion packages adopted with goals of closing the treatment gap, helping individuals in crisis more effectively, restricting access to drugs that are precursors in the manufacture of methamphetamine, and supporting the long-term success of families with children.

### Legislative Changes

During the session DASA staff reviewed and commented on 420 bills and amendments, providing expertise on a wide range of subjects linked to the prevention, intervention, and treatment of alcohol and other drug abuse.

ESHB 1031 grants authority and funding to the Department of Social and Health Services (DSHS) to manage a Problem and Pathological Gambling Program. The program covers the prevention as well as treatment of problem and pathological gambling; the training of professionals in identifying and treating problem gambling; and the treatment of family members of problem and pathological gamblers.

HB 1872 provides that a person who is restricted to the use of a vehicle with an ignition interlock device is guilty of a gross misdemeanor if attempting to circumvent the device by tampering with it.

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### Do you have a success story or news to share?

Please contact:

**Deb Schnellman**  
(360) 725-3763  
email: [schneda@dshs.wa.gov](mailto:schneda@dshs.wa.gov)

#### Prevention and Treatment Resources

DASA website: [www1.dshs.wa.gov/dasa](http://www1.dshs.wa.gov/dasa)

Chemical Dependency Professionals:  
<http://www.cdpcertification.org/default.asp>

Alcohol/Drug 24-Hour Helpline:  
1-800-562-1240  
[www.adhl.org](http://www.adhl.org)

Alcohol/Drug Prevention Clearinghouse:  
1-800-662-9111  
<http://clearinghouse.adhl.org>

Media Literacy:  
[www.teenhealthandthemedianet](http://www.teenhealthandthemedianet)

**DSHS Secretary**  
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FOCUS is published quarterly for those  
in the chemical dependency field by the  
Division of Alcohol and Substance Abuse,  
within the Washington State Department  
of Social & Health Services.



## Treatment Expansion Becomes Reality

By Ken Stark

A significant budget increase for chemical dependency treatment supported by the Governor and the Legislature became a reality on July 1, 2005. As many of you know, support for this initiative was based on research that demonstrated major reductions in acute care medical, pharmaceutical, acute care psychiatric and long-term care costs for persons needing treatment who received such services, compared to individuals who did not. The research also showed a large decrease in arrests for the treatment group compared to the non-treatment group.

Monies have been distributed to counties for outpatient treatment capacity expansion and residential providers for treatment bed expansion. Increased resources have also been allocated to Tribal prevention and treatment services.

The treatment expansion initiative focused on working-age, disabled populations and those receiving Temporary Assistance to Needy Families. Additionally, we received resources for criminal justice clients, civil commitment, secure detox, youth and problem gambling.

The expectations of the Governor's Office and the Legislature require that we continue to monitor treatment utilization as well as research to demonstrate that cost offsets are achieved. It is important that counties, Tribes and providers do what-

ever they can to improve access so we serve the required number of new clients given the added dollars. It is also important that we focus on quality assurance to continue to improve treatment completion so the expected outcomes are achieved.

The Division of Alcohol and Substance Abuse (DASA) will be monitoring the TARGET treatment database to ensure we achieve our goals. We will also be coordinating with allied fields to ensure a steady stream of referrals to our treatment system. DASA is asking all contractors to let your contract manager know if there are problems or technical assistance needs during this ramp up of services. To ensure services are available to eligible clients, it is crucial that we all work together.



2005 Legislative Session continued from Front Cover

**E2SHB 2015** revises the Drug Offender Sentencing Alternative (DOSA). While the existing DOSA sentence stays intact (an offender is sentenced to one-half the midpoint of the standard range, receives substance abuse treatment while in prison and then serves a term of community custody equal to the other half of the midpoint of the standard range, or longer based on provisions of the Offender Accountability Act), a community-based alternative is established. The community-based alternative allows an offender to be sentenced to three to six months of residential chemical dependency treatment in lieu of incarceration, as well as receiving a term of community custody and affirmative conditions.

**ESHB 2266** restricts access to precursor drugs used in the manufacture of methamphetamine. The State Board of Pharmacy is required to implement a state-wide pilot project to require collection of data related to retail transactions involving ephedrine, pseudoephedrine, or phenylpropanolamine. Sheriffs are to maintain a record of such products found at methamphetamine laboratory sites.

**E2SSB 5213** supports the long-term success of families of children by removing barriers to Temporary Assistance for Needy Families and the WorkFirst programs. In particular, those convicted of drug-related felonies who have completed their sentences are now eligible for TANF benefits upon re-entry into the community.

**SSB 5644** amends current statutes so that the stay on driver's license suspensions pending entry of a deferred prosecution is extended to not longer than 150 days after charges are filed, or two years after the date of arrest, whichever is shorter.

**E2SSB 5763** – "The Omnibus Treatment of Mental and Substance Abuse Disorders Act of 2005". Among its many provisions, substantial funding is provided to provide chemical dependency treatment to Medicaid-eligible adults, and youth under 200% of the Federal Poverty Level. (See budget, below). Pilot programs are created to provide intensive case management to individuals in crisis in two counties, and to set up two integrated crisis response pilots, to include secure

detoxification facilities. Funds are also allocated for the expansion of the Safe Mothers, Safe Babies program, and for the implementation of integrated mental health and chemical dependency screening and assessment protocols for use with all mental health/chemical dependency patients.

**SB 5974** directs DSHS to adopt rules to require all opiate substitution treatment programs to educate pregnant women in their programs about the benefits and risk of methadone treatment to their fetus before they are provided with these medications.

### Budget

The 2005-2007 Biennium budget includes \$59,198,000 in new funds for DASA above current maintenance level, or a 24.2% increase. Included in that increase is:

- \$1,500,000 for the prevention and treatment of problem and pathological gambling;
- \$8,433,000 for target vendor rate increases for residential providers;
- \$32,952,000 to greatly expand treatment access for Medicaid-eligible adults in both residential and outpatient settings;
- \$6,726,000 to expand treatment access for low-income youth in residential and outpatient settings;
- \$6,194,000 for two integrated crisis response pilot programs – one rural, one urban – to include secure detoxification facilities;
- \$488,000 for two intensive case management pilot programs;
- \$3,200,000 to expand the Safe Mothers, Safe Babies program;
- \$460,000 to develop integrated mental health/substance abuse screening and assessment tools, and to train providers in their use.

We look forward to an exciting Biennium in working with our partners to implement this new legislation and use the expanded funding efficiently and effectively. Please contact Doug Allen at 360-725-3702 or [allende@dshs.wa.gov](mailto:allende@dshs.wa.gov) if you have any questions about the new legislative and budgetary initiatives. 



## WASBIRT Offered in Eastern Washington

By Dennis W. Malmer, Program Manager

The Division of Alcohol and Substance Abuse (DASA) would like to welcome Yakima Valley Memorial Hospital (YVMH) to the Washington State Screening, Brief Intervention, Referral, and Treatment (WASBIRT) Program. YVMH began screening patients as part of the WASBIRT Program in July 2005, and joins Harborview Medical Center in Seattle, Providence Everett Medical Center, Southwest Washington Medical Center in Vancouver, Tacoma General Hospital, Yakima Regional Medical and Heart Center, and Toppenish Community Hospital in providing WASBIRT services. DASA expects to expand WASBIRT screening services at 10 hospitals in six counties by October 2005.

### Notes and Comments From the Field

"For me, it is hard to implement something new (like motivational interviewing) as brief interventions/referral and then just walk away wondering if it did any good. Apparently it did! About two weeks after our interview, the patient called back to follow-up with the referral. It is not so much the 'how should they stop' as much as it is for each patient to realize 'why they should look at stopping.' This was probably one of the biggest steps toward the patient changing her life for the better. You never really know when a patient will call back out of the blue to say...I'm ready, please help."

"Slowly but surely we are impacting peoples lives. Many patients have shared personal revelations about their use of alcohol and drugs because of their stay in the ER. The other day, another staff person came to me and said, 'I don't know what you did but after you met with the patient, he was cooperative, kind, and a different person than when he walked in.' The patient entered the ER very difficult and distrustful. He appreciated the screen and someone talking with him about his story of healing."

"My spouse and I have been spending inordinate amounts of time at the hospital ER lately. During one of the visits, I had the chance to observe one of the chemical dependency professionals (CDPs) approaching patients to determine whether the patient was amenable to screening. The CDP was very professional as she moved about the ER. Later, one of the ER nurses said she was happy to have WASBIRT CDPs in the ER. Coming from an ER Nurse, that is high praise."

"I'm a drug addict and an alcoholic. I was introduced to pot when I was 12 and needed something to distract me from what was really going on. That was how crappy I felt about myself and the world around me. The pot quickly turned to drinking, speed, acid, and mushrooms. Despite completing an intensive outpatient program early in life, I went back to the

same place I had always been, and within a month, I was getting loaded. I still wasn't honest about anything. I got into an accident and had to go to the hospital ER. While there, I got screened and introduced to the WASBIRT Project. I began one-to-one counseling sessions and finally accepted a referral for more intensive treatment. All of the people I worked with had a hand in helping me become the person I am today. The person I am today tries to be a good father, son, friend, and human being. My children get to see me clean and sober and be there for them. I'm a college student and I referee little league sports. But the best part of it all is that somehow, in spite of it all, I feel good about who I am and where I've been, and for that, I am grateful!"

We are pleased that WASBIRT services are helping people make positive changes in their lives. WASBIRT has enrolled over 14,500 patients in services during its first 15 months of operation. We expect to hear many more uplifting stories from the field in the future.

If you have any questions about WASBIRT, please contact Dennis Malmer at (360) 725-3747, toll free at 1-877-301-4557, or by e-mail at [malmedw@dshs.wa.gov](mailto:malmedw@dshs.wa.gov).



To continue bringing you useful information in FOCUS, let us know what matters most to you, and the drug prevention and recovery news and successes happening in your community. Send your comments and information to [Deb.Schnedman@dshs.wa.gov](mailto:Deb.Schnedman@dshs.wa.gov).

# Muckleshoot Tribe Opens New Health and Wellness Center

By Francis Carr, Region 4 DSHS Community Services Division

**“How far you go in life depends on your being tender with the young, compassionate with the aged, sympathetic with the striving, and tolerant of the weak and strong.”**

— George Washington Carver

In June Harvey Funai, Region 4 DSHS-Division of Alcohol and Substance Abuse (DASA) and I attended the grand opening of the Muckleshoot Health and Wellness Center. The director of the center, tribal council leader and elders gathered to declare that the building was built for the Muckleshoot community and their families, and added “Come, all you got to do is use it.”

The 95,000 square foot facility is state of the art in both design and services. The center contains 20 examination rooms for medical care, 11 dental stations and a Behavioral Health Program, that is surrounded with views of Mt. Rainier and a mini amphitheater. In addition to the services currently offered, an optical department, full service lab and limited x-ray services are on the way. The Wellness Center side includes physical therapy, a competitive-size gymnasium and pool, healthy snack bar, and beautiful conference rooms for community health education events. A child care facility is also included on site.

As Harvey and I toured the facility, we were struck over and over again by the awesome work, creativity, sensitivity, tenacity, love and financial commitment



that went into the launching and actualization of the vision for such a project. We were especially interested in seeing and learning more about the DSHS Muckleshoot Out-Station. The Division of Alcohol and Substance Abuse has a great presence in the Behavioral Health complex.

The section in the Guide Book on Region 4 Community Services Division provides information on our services, mission and purpose, hours of service, and the Auburn office location. I was touched by the inspirational quote shown on the DSHS page because it speaks so clearly about the work we do, how we think and believe.

## Mission of the Muckleshoot Health and Wellness Center

To provide culturally sensitive, responsive, cost effective, high quality health care services that meet the needs of our patients, who have a diverse background

of traditional, cultural, and spiritual values. To supplement those health services with a comprehensive wellness program designed to strengthen mind, body, heart, and spirit, thus enabling our patients to improve their overall quality of life.

## Brief Historical Overview

The Center's Services Guide Book shares that the health clinic first began back in the early 1970's at the community center (currently the Tribal School building). Over the years, the clinic grew from a total of five rooms, including two exam rooms. Many moves to various sites took place to accommodate growth. By 2001 over 1,500 patients were being served. Other Tribal buildings were used for Behavioral Health, Community Health, Massage, Dental, Diabetes and Health/Business Administrative Offices, plus WIC and DSHS. It was very challenging to operate at full capacity with limited space, and to have a fully functioning team of health care providers in so many different locations. Despite the many challenges, a milestone has been reached. The opening of the new Health and Wellness Center was a wonderful day in history for the Muckleshoot Tribal Community.

# Residential Treatment Providers Directory Now Available Online

By Eric Larson, DASA Region 2 Treatment Manager

DASA is pleased to present the online version of DASA's Residential Provider Directory. The directory is designed to augment and add to the current Directory of Certified Chemical Dependency Services in Washington State, or the Greenbook, by adding information on specific admission criteria and exclusions, the intake contact person, admission exclusions, and treatment philosophy that the agency employs in the treatment of chemically dependent patients that are publicly funded in the state of Washington.

This directory is designed to be a work in progress, so I welcome all feedback that can be employed to improve its utility. Please direct your comments back to me by replying to this e-mail, fax or by phone (fax and phone numbers listed below).

Thank you to all the providers and others who assisted in collecting information for this useful tool. The web address for the Residential Provider Directory is <http://www1.dshs.wa.gov/DASA/dasanew.shtml>.

# Helpline Continues to Provide Vital Services

## New Initiatives Launched to Reduce Stigma

### Alcohol/Drug 24 Hour Helpline

In June we welcomed Paula Fisher as deputy director of the Helpline, replacing Tammy Dow. Paula brings to our agency a wide range of experiences in the chemical dependency field, including volunteering for the Helpline on Sunday morning phones for 11 years. Please feel free to stop by and get acquainted, or call Paula at (206) 722-3703.

During the last six months Helpline volunteers and staff helped over 15,000 callers with alcohol or other drug counseling and information, and 1,700 callers needing help for problem gambling. We have also been busy providing assistance to Access to Recovery counties, managing and updating seven websites, and making more progress on our History of Chemical Dependency Services in Washington State project. If you have information to contribute to this project, please contact Ann Forbes at [annf@adhl.org](mailto:annf@adhl.org).

### The Clearinghouse

To better serve our customers, the Clearinghouse has completed a new database that keeps a running inventory of the 2,000 titles in our warehouse and Resource Center. Our website has been updated with the latest county, state and national news releases and upcoming trainings (<http://clearinghouse.adhl.org>). People can now join the 1,300 subscribers of Prevention E-Briefs by signing up on our website, and we are working to add more electronic files of brochures and reports.

The Meth Teeth brochure is in high demand and we have had it copyrighted. The Meth Teeth design will be added to our plastic litter bags.

We are also reviewing all of our videos for content and quality and updating our inventory.

The Clearinghouse distributed 215,000 resources in the past six months, and presented resources in person at 70 events.

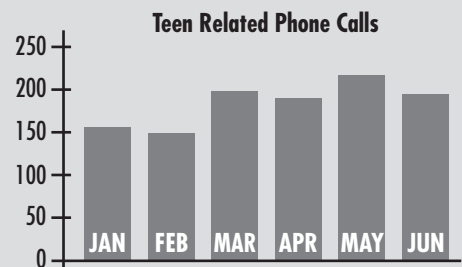
Our most frequent customers were prevention specialists, treatment providers, and school district staff.

### The Teenline

The TeenLine has been through so many changes in the last six months. We converted a back office into a funky, home-away-from home hang out complete with lime green walls, real couches and the TeenLine phone and computer. The volunteers are trained and do their phone shifts in this office as well as hang out before or after their shifts.

The TeenLine now has 14 volunteers, which is the most this agency has ever seen! They not only work a two-hour phone shift each week, but also take part in attending community resource fairs. The have been invited to sit on different community panels discussing teen substance abuse and dating violence. The teens have been busy developing their culinary skills and make dinner for the Teen Hope Shelter in Shoreline twice a month.

Our newly designed web site was launched mid-April ([theteenline.org](http://theteenline.org)) and there is now a link on our web site where parents, teens and other friends and family members can e-mail us directly ([askateen@adhl.org](mailto:askateen@adhl.org)). Last year the web site received almost 130,000 'hits' and we felt it was important to give our internet users the option to e-mail us with any questions or concerns they may have.



From January through June the TeenLine and Helpline combined had received a total of 1,106 teen related calls. The majority of which were referred to Outpatient Youth Treatment (232 callers), Inpatient Youth Treatment (200 callers), DASA/DSHS Services (117 callers), and Support Groups (205 callers). We are on target for reaching our 2005 goal of 2,100 phone calls.



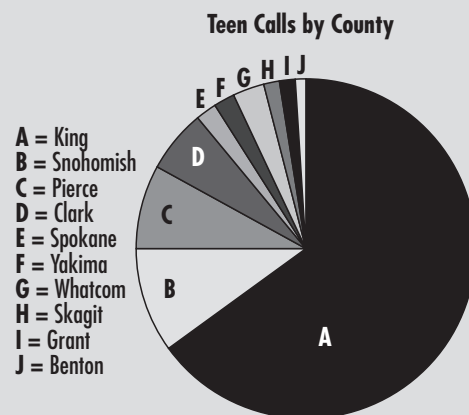
This has proven to be extremely beneficial as we have received many messages and the teens have been doing a great job in responding to each one of them. Each month the number of emails have increased. The Teenline email address is being heavily marketed during the start of the new school year.

The teen volunteers are a very culturally diverse group and share Latino, Greek, Ethiopian, Chinese, and Vietnamese backgrounds. It has been so amazing to watch how they all have bonded and are able to work so well with each other. They bring so much energy and enthusiasm into this office every day. We are very proud of the work they do and are in awe of their commitment and devotion to the TeenLine.

### New Initiatives

The Helpline has launched the Spotlight on Recovery Stigma Reduction Project (SOR), comprised of people in recovery, to promote the message that recovery from addiction disorders is real, it works, and is sustainable over a person's lifetime. By speaking out publicly about their recovery status, people supporting this organization hope to educate society and legislators about the value of providing resources for recovery; encourage others to feel comfortable voicing their recovery status, thus reducing the stigma/discrimination that still exists toward people with former addiction disorders; and finally, to provide positive, encouraging role models to those people still in need of recovery. To this end, SOR sponsors events and activities to provide a forum for their message and to invite increasing numbers of recovering individuals to put a positive face on recovery.

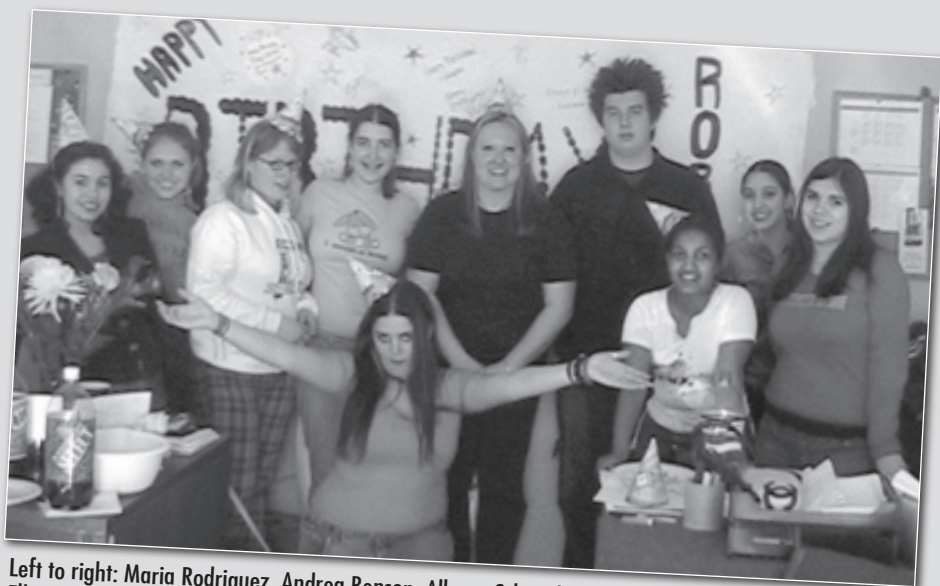
So far SOR has completed three projects: a "recovery picnic" for people in recovery to come together, Recovery Speaks, a DVD of personal recovery stories, and the Recovery Garden in Seattle for friends, family members and others to honor people in recovery, and those who have helped them achieve it. For more information about these projects and how to help support them, contact Gerry Coughlin at [spa@adhl.org](mailto:spa@adhl.org) or (206) 725-3700, or visit [www.spotlightonrecovery.adhl.org](http://www.spotlightonrecovery.adhl.org).



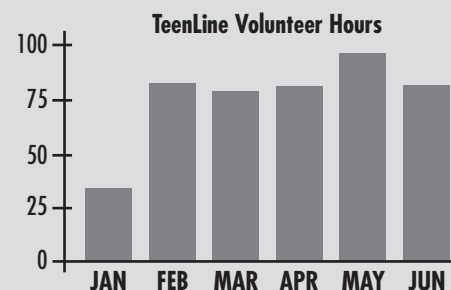
### The topics that teens email us about are:

- Concerns about a parent's drug use
- Relationship issues between boyfriends and girlfriends
- Child custody/support issues
- Information on steroid use for a school project
- Self reported 'cutters' wanting to stop self harming behavior
- Concerns about own drug use
- Information on TeenLine for a school project
- Information on how to lose weight
- Concerns about possibly being pregnant and where to turn for help

Each month the number of e-mails have increased and it will be heavily marketed during the start of the new school year.



Left to right: Maria Rodriguez, Andrea Benson, Allyson Schneider, Angela Bartnick, (bottom of picture) Elle Petropoulos, Robyn Smith, Kameron Lo, Bezawit Semu, Melissa Kleppinger, Gloria Rodriguez



Our 14 teen volunteers commit to a two-hour phone shift per week, and they attend community health fairs and panels. They recently wrote and recorded King County's summer radio teen drinking prevention campaign for two local area radio stations.

# DASA Support Helps Increase Treatment Completion Rates in Columbia County

By K. Todd Wagner, Clinical Director, Blue Mountain Counseling of Columbia County

A couple years ago, a memo came across my desk from the Division of Alcohol and Substance Abuse (DASA). While reading it, I remember being initially struck with some paranoia and questions as to whether DASA was becoming a 'big brother,' as the memo was about improving treatment completion rates in each county, and that DASA would be monitoring this.

Looking back now, my reaction today is much different than my initial one. In a recent email sent to Ella Hanks, DASA Region 2 Administrator, I made the comment "whoever thought of the idea of improved treatment completion rates being monitored by DASA really had a good idea." As a provider, knowing that this was being looked at became something that motivated our program just a little more each day to find ways to keep people engaged in the recovery process.

In response to this request to improve treatment completion rates, there were four distinct areas that our treatment program here in Columbia County made significant changes in. The first thing that we implemented was the use of quality assurance / outcomes measurement testing. The primary tool we utilize for this is the Treatment Outcomes Package Psychological Testing from Access Measurements, Inc. All clients enrolled in our treatment program are given initial and follow-up testing at regular intervals to ensure that different life domains are being measured and addressed in their treatment.

The second area that we made changes in centered on client engagement. Our goal was to become more indi-


vidualized in the treatment planning process with clients. Julian Gonzalez, DASA Certification Specialist, provided us with some excellent on-site assistance in going from a

one-size fits all treatment planning and review process, to one that was very inclusive of the client's voice and specific needs. The third area was our treatment team's philosophy: although the recovery process takes a lot of work, it should also be fun. Over one-third of our intensive outpatient program curriculum utilizes the ROPES exercises from Project Adventure. Our clients have commented that be-

ing involved in these recovery-based experiential activities is something that keeps them coming back for new challenges.

Finally, the last area that helped us improve our program was participating in the DASA Statewide Patient Satisfaction Survey. Felix Rodriguez, DASA Research Investigator, has provided us with this tool for several years now, and the results of the survey have allowed us yet one more way to integrate our patients needs with changing and improving our treatment program.

I'm sure there were other minor factors that allowed us to improve our treatment completion rate from 37% two years ago to 74% now. If I were asked "has it been worth it

to make these changes?", my answer would be yes, as it is our treatment team's belief that any time a patient sees an area of their life that they have succeeded in, it allows them one more chance to see that living a life of recovery has its rewards. 



**The Staff at Blue Mountain Counseling**

**Front Row: left to right** — Dr. Michael Luce (Medical Director), Dimita Warren (Business Manager), Dr. Kenneth Roughton, PhD (Executive Director), K. Todd Wagner, LCSW-CDP (Clinical Director)

**Back Row: left to right** — Steve Edwards, M.Div. (CDMHP), Michael Nielson, BA (DDD Case Manager), Patty Preston (MH Case Manager), Sharon Mathews, BA-LMHC (Geriatric MH Therapist), Orinda Woods, BA (Case Manager, Administrative Assistant), Kari Hecker (MH Case Manager), Catherine Aaltonen, BS (Preventionist), JoAnn Poolman (Crisis Responder), Tain Walker, LCSW (Child & Family Mental Health Therapist), Bruce Martin, AA (Substance Abuse Intake Coordinator), Mike Paris, CDP (Chemical Dependency Professional)

## Columbia County Data

	Total Discharged	Total Excluded Categories	Total Completed Treatment
7/1/03 - 6/30/04	90	10	65
7/1/04 - 6/30/05	95	13	55
<b>Total</b>	<b>185</b>	<b>23</b>	<b>120</b>

**Total Discharged Minus Total Excluded Categories 162**

**Treatment Completion Rate 74%**

**Baseline Completion Rate 37%**

**Improved Rate Agreed Upon for 03-05 Biennium 42%**



## Amber's Story

Methamphetamine use led to Amber Barnes, a mother of two from Lacey, losing her home and her children. She lost custody of her children after divorcing her abusive husband, and her children were placed with their grandparents.



While using, Amber was arrested for drug possession and sent to jail. She initially accepted drug court, but failed to comply with her obligations and relapsed. As a result, she was required to complete residential treatment as opposed to going to jail. Amber immediately signed up for ADATSA and stayed drug-free until treatment began.

After completing 45 days of intensive inpatient treatment, Amber relocated to the Spokane area. She successfully completed her outpatient program, lived in an Oxford House for nine months, and used the support system she developed while in treatment. She found her own home and followed through with all of her legal requirements.

After 16 months in recovery, Amber was hired by American Behavioral Health Systems to provide administrative support. She was then promoted to a health care coordinator/lead care team member, responsible for making sure all patients have their health care needs met, along with training and supervising new care team staff. Amber continues to do fabulous work at American Behavioral Health Systems.

After 18 months of recovery, Amber's daughter was returned

to her custody. Amber's mother was apprehensive about this, until she saw how Amber had fulfilled all of her legal requirements, and followed through with her own expectations. When Amber regained custody of her daughter, the judge congratulated her on her successes and told her it was rare to witness children being returned to their parents in similar cases.

Amber earned her drivers license, purchased her own car, and plans to return to school to get a degree. She continues to use her strong support system and is happy with her recovery. "Recovery from drug addiction can be done", said Amber.

### The Treatment Program

American Behavioral Health Systems is located in Spokane. The Program serves both men and woman seeking chemical dependency treatment. Treatment modalities offered by the program are intensive inpatient, recovery house and long-term residential services.

### The Model Behind the Program

The program's primary treatment model focuses on Choice Theory and Rational Emotive Behavioral Therapy and has maintained a high completion rate with the use of these theoretical approaches. American Behavioral Health System is a responsibility-based program that teaches patients that they are in full control of their lives and futures. Patients receive information about making sound behavioral choices to get what they want out of life, are encouraged with the knowledge that there is no reason why they can't succeed, and provided with hope for the future. The staff at American Behavioral Health Systems are committed to supporting their patients, and doing all they can to meet their needs.

## DASA-TA Shows Treatment is Effective for Methamphetamine Addiction in Yakima County

*By Eric Larson, DASA Region 2 Treatment Manager*

The Yakima County Methamphetamine Action Team recently met with Attorney General Rob McKenna to help him determine his methamphetamine policy for selected communities in Washington State. Representatives from local law enforcement, drug court, and Educational School District 105 also attended.

I presented data about methamphetamines to this group from sources that included reports from the DASA-TA. For example, the treatment admission data that I generated from the DASA-TA demonstrated that methamphetamine addiction generates the same number of treatment referrals as any other drug, including alcohol. This held true in Yakima County as well as statewide.

I also presented treatment completion data from the DASA-TA which showed that the completion rates for patients using methamphetamine were no different than the completion rate for patients using other drugs, including alcohol. This theme was found to be true both in Yakima County and statewide.

Because of the usefulness of the DASA TA data, Attorney General McKenna has asked DASA to serve on his legislative advisory council.

### What is the DASA-TA?

The DASA-TA is a user-friendly system that generates reports about treatment outcomes at the state, county, and provider levels. This web-based system is used by directors of publicly-funded chemical dependency treatment programs, county coordinators, and others responsible for using outcome data to manage publicly-funded programs, improve program quality, develop policy, and enhance planning efforts. To learn more about the DASA-TA or to become a registered user, go to [www.DASA-TA.com](http://www.DASA-TA.com). All directors of publicly-funded chemical dependency treatment agencies (or their designees), county coordinators, and DASA staff are eligible to register. Others who wish to register may contact Toni Krupski ([krupstk@dshs.wa.gov](mailto:krupstk@dshs.wa.gov)) or Fritz Wrede ([wredefa@dshs.wa.gov](mailto:wredefa@dshs.wa.gov)).

How do you use the DASA-TA? We'd love to hear from you! The best responses will be published in future Focus newsletters. Please send your responses to Toni Krupski, [krupstk@dshs.wa.gov](mailto:krupstk@dshs.wa.gov) or fax to her at 360-407-1044.

## 2005 Saying It Out Loud Conference A Resounding Success

By Francis Carr, Region 4 Community Services Division



**From left to right:** Jessica Zinda, DDD; Doug North, IPSS; Harvey Funai, DASA; Robin Arnold-Williams, DSHS Secretary; Joseph Connor, CA; Frances Carr, CSD receiving the DSHS Region 4 GLBTQ Work Group Cross-Divisional Team Award.

The GLBTQ (Gay, Lesbian, Bi-sexual, Transgender, Questioning) Conference was held in May at the Shoreline Community Center, with a host of outstanding presenters and insightful workshops for over 280 participants. Governor Christine Gregoire sent a proclamation announcing June 2005, as Gay, Lesbian, Bisexual and Transgender Pride Month.

The keynote speaker, Jamison "James" Green, is an internationally respected leader within the transgender movement. A dynamic speaker and compelling writer, James has appeared in eight documentary films, and received every major award given by the largest national transgender organizations. Mr. Green spoke about some of the challenges and issues Transgender people face – issues surrounding access to health insurance and hate crimes. He suggested that medical schools need to provide training for doctors to better educate them and to increase awareness and under-

standing of this community of people.

He shared the story behind current efforts to extend non-discrimination ordinances, laws, and resolutions to protect the concept of "gender identity and expression." He urged those in attendance to speak up and to get involved with public policy laws and legislative efforts, in order to move issues forward surrounding transgender and others facing discrimination based on gender identity.

Mr. Green stated that the word "transgender" has different meanings for people and that it is a political term to increase awareness and break down gender boundaries. Transgender is different from being "homosexual" – although there might be Transgender people that are homosexual/Gay. He reiterated the importance of people coming together in the GLBTQ community to give collective support to each other rather than being divisive. He echoed again and

The following awards were presented to several individuals, groups and organizations for their outstanding support to the GLBTQ Community:

– LIFETIME AWARD –

Total Experience Gospel Choir  
(they sang a beautiful rendition of "I Believe I Can Fly")

– ORGANIZATION –

Asian Counseling & Referral Service  
Management Team and Center  
for Human Services

– INDIVIDUAL –

Sgt. Claudia Murphy,  
Bellingham Police Department

Officer Pauline Renick,  
Bellingham Police Department

Ira Stallsworth

again that everyone has value as human beings and that justice and equality must prevail if we are to be a humane society.

The conference included the following workshops: Diversity Panel; What Is Asked About Trans People; Domestic Violence in the GLBTQ Community; Identifying the Challenging Barriers to Sexual Expression for GLBTQ Individuals with Disabilities; GLBTQ Individuals and Smoking: Drop It Like It's Hot; Reclaiming Our Traditions and Fighting for Our Lives – Two-Spirit Women; and Teaching About GLBTQ Heroes and Role Models.

The overall atmosphere of the conference was welcoming, comfortable and very educational! Plans are already underway for 2006. You will want to consider being in attendance. The Department of Social and Health Services is one of the sponsors for this educational event.



## The Passing of a Treatment Pioneer

By Dave Wilson, Executive Director, Merit Resource Services

Howard Kelleher, one of the original founders of Sundown M Ranch in White Swan, went to the big meeting in the sky on July 7, 2005, after celebrating his 97th birthday in June.

Howard was raised in Des Moines, Iowa and moved to the Yakima Valley in the 1920's. He was in the first graduating class of Yakima Valley Community College. Howard's greatest love and achievement, outside of his family, was his 45 years of recovery from alcohol addiction. Howard carried the message of recovery to other alcoholics for many years through involvement with Alcoholics Anonymous and professional counseling services.

Howard and his wife, Katherine, provided counseling to thousands of alcoholics in the forma-

tive years of Sundown, from which he retired in 1975 (at age 67). Howard was also one of the original founders of Yakima Council on Alcoholism (Triumph Treatment Services), where he served on the Board of Directors for over 10 years and remained a Board Member Emeritus until his passing. Following his retirement from Sundown M Ranch, in 1979, Howard helped found The Valley Alcohol Council (MERIT Resource Services), where he served as a Board Member, then later a short stint as Executive Director, and finally as a Board Member Emeritus. In his honor, MERIT Resource Services established the Howard Kelleher Scholarship in 1995, which is awarded annually to local graduating high school students.

In addition to attending every Board Meeting since 1979, Howard had continued to provide counseling services and conduct group therapy until his death. Howard's contributions to Alcoholics Anonymous, and to the development of addiction counseling services in Yakima Valley over the last forty years are immeasurable.

To attempt to sum up Howard Kelleher's presence would be impossible without this story: About ten years ago Howard met a young man with alcohol problems and offered to help him get sober. The young man later ended up in jail where he then asked for Howard's help through a letter. The young man didn't know Howard's last name so he mailed the letter addressed to: Howard, Alcohol, Sunnyside, WA. Howard got the letter! Howard touched the hearts of thousands of people; all will miss him.



## New DOH RTF Regulations to be Enacted

By Jean Phillips, DASA Certification Field Services Manager

A long-term regulatory improvement project will be completed soon with the enactment of a new set of Department of Health (DOH) licensing regulations. Chapter 246-337 of the Washington Administrative Code (WAC) consolidates three separate, but similar, regulations into one comprehensive set of health and safety licensing rules and is the product of a five-year collaboration with DOH, the Division of Alcohol and Substance Abuse (DASA), the Mental Health Division (MHD), and representatives from the affected DOH-licensed residential programs.

WAC 246-337 contains a core set of requirements that address all facility service categories, plus program-specific requirements. The rules are designed to be flexible in order to meet the changing needs of the adult and child populations receiving treatment in alcoholism treatment facilities certified by DASA, and the two types of community-based residential evaluation and treatment facilities for mentally ill adults and children regulated by MHD.

DASA and DOH Facilities and Services Licensing have had a collaborative working agreement since 1998 to spell out areas of responsibility, coordinate services, and avoid conflicting regulations and duplication of oversight processes for dually licensed/certified chemical dependency treatment agencies. A similar working agreement is planned between DOH and MHD. DOH also plans to develop an implementation resource guide for WAC 246-337 and will be inviting stakeholder input in the near future.

The website link is [www.doh.wa.gov/rules/adopted\\_rules.htm](http://www.doh.wa.gov/rules/adopted_rules.htm) (then select 246-337). For questions, contact Jean Phillips, DASA Certification Field Services Manager, at (360) 725-3760 or by e-mail at [phillje@dshs.wa.gov](mailto:phillje@dshs.wa.gov).



## Out-of-State Chemical Dependency Counselors Visiting the Jobline

By Sue Green

With the additional funding Washington has received to expand treatment services, increasing the number of chemical dependency counselors in Washington State has become a greater priority. To help recruit more counselors to Washington, DASA promoted the Alcohol and Drug Helpline's Jobline in the August issue of *Addiction Professional*, the official publication of the National Association of Alcoholism and Drug Abuse Counselors. This strategy has generated at least eight out-of-state chemical dependency counselors to post their resume to the web-based Jobline.

The Chemical Dependency Professionals (CDP) Jobline, [www.cdpcertification.org](http://www.cdpcertification.org), is a free resource for CDP's, counselors-in-training, and employers looking for counselors. Since its inception, over 875 jobs and 400 resumes have been posted.

### There are four ways to use this site:

**Search Jobs:** Search the extensive database for Washington State counselor jobs.

**Post a Job:** List a new job opportunity.

**Search Resumes:** Search for a Washington State counselor in your area.

**Post a Resume:** Post your resume online.

Jobs and resumes can be searched for the entire state or an individual county. The site includes specific openings in treatment agencies, as well as county and state level positions.





## Protecting Youth and Vulnerable Adults

Regulations require all Division of Alcohol and Substance Abuse (DASA) certified and contracted providers to conduct a criminal background check on all employees, at the time of hiring, who will have unsupervised access to youth or vulnerable adults during the performance of their duties.

The purpose of the requirement is to protect youth and vulnerable adults from people convicted of crimes against others by not allowing unsupervised access to them.

By conducting a criminal background check, the person making hiring and continued employment decisions can determine whether or not a prospective or current employee or volunteer has a criminal history that may disqualify the person from positions that have unsupervised access to persons protected under the law.

### Important definitions:

**Youth:** Means any person 17 years of age or younger;

**Unsupervised Access:** Means not in the presence of another employee or volunteer from the same organization as the applicant, or any relative or guardian during any work associated with the organization;

**Vulnerable Adult:** Any adult (18 years of age or older) who lacks the functional, mental, or physical ability to care for themselves; and,


### Disqualifying Crimes or Disciplinary Board Decisions:

Generally, most disqualifying crimes mean when a person has been convicted of a crime or the subject to a disciplinary board decision that is listed in Revised Code of Washington (RCW) 43.43.830.

Governing bodies and administrators of DASA certified and contracted providers should ensure that criminal background checks are conducted when required to avoid endangering protected populations.

DASA published the revised Background Check Resource Guide for DASA Certified and Contracted Agencies in June 2004. The guide is intended for use by anyone seeking more information regarding criminal background checks on employees or volunteers in a DASA certified or contracted organization. You may request a copy by calling the Washington State Alcohol/Drug Clearinghouse at 1-800-662-9111, by e-mail at [clearinghouse@adhl.org](mailto:clearinghouse@adhl.org), or their website at <http://clearinghouse.adhl.org/>.

The Background Check Resource Guide for DASA Certified and Contracted Agencies (June 2004) can be also be accessed as a PDF file on the DASA web site: <http://www1.dshs.wa.gov/dasa/services/certification/certificationFAQs.shtml>.

If you have questions about information in the guide or this article, contact Robert S. Geissinger, CCDCIII, DASA Certification Section, by calling Toll free 1-877-301-4557 or (360) 725-3728, or by e-mail at [geissrs@dshs.wa.gov](mailto:geissrs@dshs.wa.gov). 

## Seattle Mariners Hit A Home Run for Recovery


Seven Major League Baseball organizations are proving that not all the great comeback stories take place on the baseball diamond. The Seattle Mariners, Los Angeles Dodgers, St. Louis Cardinals, Minnesota Twins, Pittsburgh Pirates, Washington Nationals and Houston Astros all sponsored 2005 Recovery Month celebrations at their home parks in September. Pre-game ceremonies and recognition of fans in recovery marked the events and furnished positive information to thousands of fans that addiction is a treatable disease and recovery is possible. The events, sponsored by the Johnson Institute in collaboration with the Substance Abuse and Mental Health Services Administration, were part of National Alcohol and Drug Addiction Recovery Month.

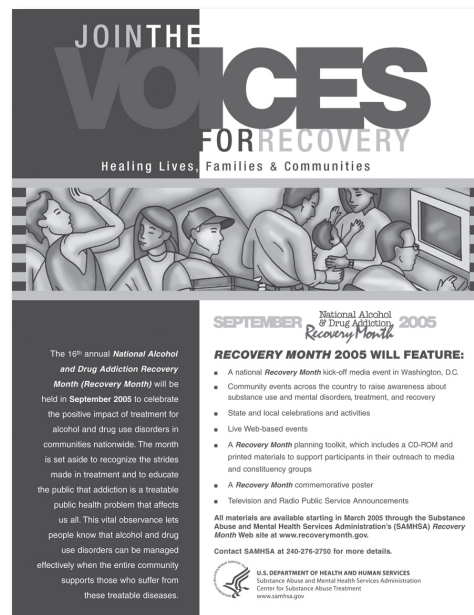
"Addiction recovery is a joyous jour-

ney, not without challenges, but marked by courage and overcoming," said Johnny Allem, president of the Johnson Institute. "Recovery Month celebrations in our Major League Baseball stadiums are important reminders that recovery happens often and brings happy outcomes. When we as Americans honor recovery and people in recovery, we are

better positioned to teach and lead new generations to make better choices about alcohol and other drugs and to seek early help when facing difficulties."

The game at Safeco Field with Seattle Mariners playing the Los Angeles Angels provided an opportunity for supporters of recovery to celebrate National Alcohol and Drug Addiction Recovery Month while enjoying a victory of the 8 to 1 defeat of LA.

For materials to honor and promote addiction recovery in your community throughout the year, a toolkit is available at [www.recoverymonth.org](http://www.recoverymonth.org). 



**JOIN THE VOICES FOR RECOVERY**  
Healing Lives, Families & Communities

The 16th annual National Alcohol and Drug Addiction Recovery Month (Recovery Month) will be held in September 2005 to celebrate the positive impact of treatment for alcohol and drug use disorders in communities nationwide. The month is set aside to recognize the strides made in treatment and to educate the public that addiction is a treatable public health problem that affects us all. This vital observance lets people know that alcohol and drug use disorders can be managed effectively when the entire community supports those who suffer from these treatable diseases.

**SEPTEMBER National Alcohol & Drug Addiction Recovery Month 2005**

**RECOVERY MONTH 2005 WILL FEATURE:**

- A national Recovery Month kick-off media event in Washington, D.C.
- Community events across the country to raise awareness about substance use and mental disorders, treatment, and recovery
- State and local celebrations and activities
- Live Web-based events
- A Recovery Month planning toolkit, which includes a CD-ROM and printed materials to support participants in their outreach to media and constituency groups
- A Recovery Month commemorative poster
- Television and Radio Public Service Announcements

All materials are available starting in March 2005 through the Substance Abuse and Mental Health Services Administration's (SAMHSA) Recovery Month Web site at [www.recoverymonth.gov](http://www.recoverymonth.gov).

Contact SAMHSA at 240-276-2750 for more details.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Substance Abuse and Mental Health Services Administration  
Center for Substance Abuse Treatment  
[www.samhsa.gov](http://www.samhsa.gov)

## Children's Administration and DASA Collaborate to Help More Parents Get Treatment

By David Brenna, *Children's Administration*

Clients of the child welfare system have often been clients of the state Division of Alcohol and Substance Abuse (DASA) as well. Families with serious parenting problems typically require treatment. Social workers report upwards of 80 percent of the families they see have some kind of substance use disorder. In light of this, DASA and the state Children's Administration (CA) recently developed the Substance Abuse Services Initiative, designed to integrate child welfare services.

The first order of business was to identify and test the utility of a screening tool for social workers in the field. The UNCOPE, a six item questionnaire developed by Dr. Norman Hoffman, was selected for its ease of use and strong validity rating. The Yakima Child Protective Services (CPS) office was chosen to pilot the UNCOPE. In April 2005, CPS professionals in Yakima began using the instrument with all cases deemed to be open for further investigation.

The pilot did not get off to a smooth start! Social workers were reluctant to apply the

tool and believed their clients would resist, react, and generally were poor candidates for referral. With support from a county-funded chemical dependency professional (CDP) available to take referrals, engage clients, and consult with social workers, the project went forward.

After three months, the project is an incredible success. Yakima CPS social workers are now strong supporters of screening, and the numbers support that: over 50 percent of new clients are now screened for referral to chemical dependency assessments, and 90 percent of those turn out to be in need of treatment. Statewide, only 18 percent of child welfare clients are referred for services.

With legislative support for CDPs stationed in child welfare offices, and the endorsement of Yakima social workers, the next challenge is to roll out the screening/referral approach across the state.

For more information about the Substance Abuse Services Initiative, contact David Brenna at BRDC300@dshs.wa.gov.

## Building Effective Treatment Services

### DASA Launches Evidence-Based Practices Website

By Felix I. Rodriguez, Ph.D., *Research and Evaluation*

What evidence-based practices are the most appropriate for specific drug problems? For specific populations? Where do you get up-to-date information on evidence-based practices for treating chemical dependency?

The Division of Alcohol and Substance Abuse, in partnership with the University of Washington Alcohol and Drug Abuse Institute (ADAI) and the Northwest Frontier Addiction Technology Transfer Center (NFATTC), has launched the Evidence-Based Practices (EBP) website, a searchable database on the internet designed to help treatment providers and others make informed decisions on how to build effective treatment services. The website address is: <http://adaa.washington.edu/ebp>.

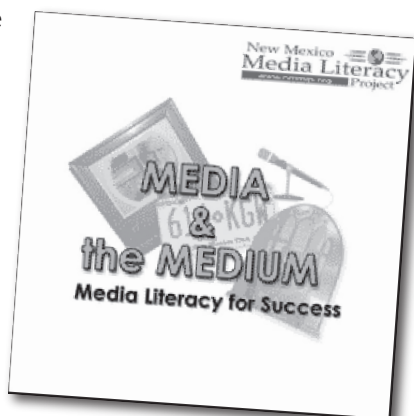
Currently, the EBP database has 41 entries covering cognitive and/or behavioral interventions, and pharmacological therapies. Each entry contains information on developers, population studied, drug studied, therapy format, therapy type, delivery mode, setting, description of the intervention, noteworthiness based on ranking scores given by independent researchers, training requirements, manual availability, and supporting references. Many of the manuals can be obtained electronically free of charge. The database will continually expand as more interventions are identified.

Users have three options available to search the EBP database. They can view a matrix that matches an evidence-based practice with specific population groups and drug problem. They can search using specific criteria such as population, setting, drug problem, therapy format, and therapy type. And lastly, users can browse the database alphabetically by title.

Other than the searchable database, the EBP website is a rich resource containing citations of review articles and other publications, and links to other relevant sites. If you have comments or suggestions about the website, please contact Toni Krupski, Ph.D., by phone at (360) 725-3739 or by email at [krupstk@dshs.wa.gov](mailto:krupstk@dshs.wa.gov).

## Media and the Medium

The New Mexico Media Literacy Project has developed a new CD-ROM curriculum, *Media and the Medium*, containing 37 lesson plans that teach students both technical and creative aspects of media making while integrating media literacy. Developed for all ages of learners in educational and community settings, the lessons help students deconstruct existing messages and understand the process of creating new media by using multimedia examples such as movie clips, TV commercials, songs, ads and photographs. The curriculum contains over 200 printable pages of lesson plans, Internet articles, handouts, activity sheets and more than 65 media examples (TV commercials, songs, print ads, photographs, Internet articles and news clips). More information can be found at [www.nmmlp.org](http://www.nmmlp.org).





## Tribes Partner to Reduce Problem Gambling

By Steve Smothers and Linda Graves

The Division of Alcohol and Substance Abuse (DASA) is excited about the opportunity to partner with several tribes for the treatment of pathological gambling.

Consultations have begun with the Muckleshoot, Tulalip, Puyallup, Nisqually, Jamestown S'Klallam, Squaxin Island, and Swinomish Tribes to implement a problem-gambling treatment program which includes:

- Advanced training to develop qualified treatment professionals;
- Treatment for problem gamblers and family members throughout the state of Washington at little or no cost to the client;

- Acquiring and distributing gambling addiction recovery information to patients and their families;
- Professional clinical supervision for treatment providers; and
- Client outreach, including screening for financial and clinical eligibility for problem and pathological gambling, and referral protocols.

For more information about problem gambling, contact the Problem Gambling Helpline at 1-800-547-6133 or 1-800-562-1240. For more information about DASA's Problem Gambling Program, contact Linda Graves at (360) 725-3813 or [gravell@dshs.wa.gov](mailto:gravell@dshs.wa.gov).



## Washington Receives New Grant to Reduce Underage Drinking

By Aaron Starks

The Division of Alcohol and Substance Abuse (DASA) has received a \$350,000 grant from the federal Office of Juvenile Justice and Delinquency Prevention's Enforcing Underage Drinking Laws program. The grant will be used to continue Washington's Reducing Underage Drinking (RUaD) program through May 2007.

Three community programs will be receiving \$50,000 each: Jefferson County Sheriff; Grays Harbor County Public Health and Social Services; and Tacoma-

Pierce County Health Department. The City of Kent Police Department will receive \$75,000.

Each of the communities will have increased alcohol compliance checks, emphasis patrols, and other programming suited to meet particular needs.

In addition to the \$225,000 going to the four communities, the grant will help fund the annual statewide Prevention



Summit, development of electronic reporting for services, further development of an online mapping program for compliance

checks and other alcohol prevention information, and support for the statewide RUaD coalition.

For more information, contact Michael Langer at (360) 725-3700 or [langeme@dshs.wa.gov](mailto:langeme@dshs.wa.gov).







## Catholic Community Services Recovery Center Receives \$80,000 to Enhance Treatment

Catholic Community Services' Recovery Center in Bellingham has received an \$80,000 donation from the Lochland Foundation to enhance youth and family treatment. Mark and Cuquita Lindsey from the Lochland Foundation presented the funds with the request that this money be used to develop and implement programs that will enrich the services provided to clients and their families.

Will Rice, Clinical Director of the Recovery Center stated, "We will be using this money to develop a recreation based program for youth and families in treatment for substance abuse disorders. We are very grateful to the Lochland Foundation and the Lindsey family. They are providing us the means to enhance a program that impacts the lives of many Whatcom County families."

The goal of the Recovery Center's Recreation Program will be to help youth and families impacted by substance abuse to experience recreation as a healthy part of their recovery lifestyle.

The Recovery Center is a Washington State Division of Alcohol and Substance Abuse (DASA) licensed agency providing outpatient and intensive outpatient chemical dependency treatment to youth, adults, and families. Catholic Community Services of Western Washington includes 13 family centers, the Archdiocesan Housing Authority, a Long-Term Care System, Family Preservation Services, and a Child Care System. During 2003, CCS served more than 65,000 unduplicated clients through more than 70 programs and services.

## Pierce County Tobacco-Free Hospital Project Creates Healthy Environment for Everyone

*By Annie Merrit, Prevention Specialist, Tacoma Pierce County Health Department*

Every hour 50 Americans die from something that kills more Americans than AIDS, drugs, homicides, fires, and auto accidents combined - tobacco.

Unfortunately, those who choose not to smoke are not in the clear from tobacco-related ailments. Those who are forced to breathe tobacco smoke can be at higher risk than smokers, because secondhand smoke is not filtered.

Many business, school and health institutions across the U.S. have made efforts to keep their employees and patrons healthy by enacting smoke-free policies for inside buildings as well as outdoors. In Pierce County, MultiCare Health System, Franciscan Health System, Good Samaritan, and the Tacoma-Pierce County Health Department have made a collaborative plan to become tobacco-free by January 1, 2006. In their plan to become smoke-free, they have taken many strategically placed steps to achieve this goal, including implementation teams, signage, cessation classes offered, and nicotine replacement therapy for those who will be either just visiting the hospital or employers that are part of the plan.

A smoke-free environment is everyone's right. Moving to a smoke free campus at hospitals will ensure that all patrons will get the chance to breathe easy, and encourage those who do smoke to quit.



# Upcoming Education and Awareness Events: September – November



OCTOBER '05

## CRIME PREVENTION MONTH

Contact: National Crime Prevention Council,  
202-466-6272  
Website: [www.ncpc.org](http://www.ncpc.org)

## DOMESTIC VIOLENCE AWARENESS MONTH

Contact: National Coalition Against Domestic  
Violence, 1-800-799-SAFE  
Website: [www.ncadv.org](http://www.ncadv.org)

## 10-12 12TH ANNUAL JOINT CONFERENCE ON HEALTH, Yakima

Contact: Kathy Kimsey, 425-377-1477,  
[Kathy@wspha.org](mailto:Kathy@wspha.org)  
Website: [www.wspha.org](http://www.wspha.org)

## 11-12 TRIBAL GATHERING: BUILDING EFFECTIVE PROGRAMS AND PARTNERSHIPS, Ocean Shores

Contact: Sandra Mena, 360-407-1112 or  
DASA Training Section, 1-877-301-4557

OCTOBER CONTINUED

13-14 **GOING DEEPER—WOMEN LIVING WITH  
ADDICTION AND OTHER OF LIFE'S  
CHALLENGES**, sponsored by the Washington  
State Coalition on Women's Substance Abuse  
Issues. Warm Beach Conference Center,  
Stanwood  
Contact: [www.wscwsai.org](http://www.wscwsai.org) or  
[schambers@residencecxii.org](mailto:schambers@residencecxii.org)

## 17-21 NATIONAL COLLEGIATE ALCOHOL AWARENESS WEEK

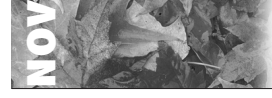
Contact: Bacchus and Gamma Peer Education  
Network, 303-871-0901  
Website: [www.bacchusgamma.org](http://www.bacchusgamma.org)

## 20-22 WASHINGTON STATE PREVENTION SUMMIT, Yakima Convention Center

Contact: DASA Training Section,  
1-877-301-4557

## 23-31 NATIONAL RED RIBBON WEEK

Contact: National Family Partnership,  
1-800-705-8997  
Website: [www.redribbon.org](http://www.redribbon.org)



NOVEMBER '05

Thanksgiving Day through New Year's Eve  
**TIE ONE ON FOR SAFETY CAMPAIGN**  
Contact: 1-800-GET-MADD,  
Website: [www.madd.org](http://www.madd.org)

2-4 **TOBACCO PREVENTION AND CONTROL  
ANNUAL CONFERENCE**, Seattle Marriott  
at SeaTac Airport, sponsored by the state  
Department of Health

## 17 29TH GREAT AMERICAN SMOKEOUT

Contact: American Cancer Society,  
1-800-ACS-2345, Website: [www.cancer.org](http://www.cancer.org)

Share your news with FOCUS readers  
statewide. If you have events, success stories,  
announcements, or a policy/advocacy issue you  
want to write about, e-mail Deb Schnellman at  
[schneda@dshs.wa.gov](mailto:schneda@dshs.wa.gov), or call (360) 725-3763.

**For more information or to register  
for trainings, contact DASA's Training  
Section at 1-877-301-4557**

**Want to share FOCUS with others? Let them know it's on DASA's website at [www1.dshs.wa.gov/dasa](http://www1.dshs.wa.gov/dasa) (click on "What's New")**



Division of Alcohol & Substance Abuse  
P O Box 45330  
Olympia, WA 98504-5330

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